

**STATE OF MAINE BUREAU OF INSURANCE**  
**WORKERS' COMPENSATION INDIVIDUAL SELF-INSURANCE AUTHORITY**  
**RENEWAL APPLICATION**

1. Employer name and mailing address and contact information;

Employer:

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Contact Person:

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tel/fax:

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2. Renewal date: \_\_\_\_\_

e-mail:

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**Please attach separate schedules for the requested information referencing the corresponding item number.**

3. Rule Chapter 250 §II (C): Enclose a check for \$300.00 in payment of the renewal fee.
4. Rule Chapter 250 §II (C)(1)(a): Supply the employer's or guarantor's most recent audited financial statements accompanied by the \$100 financial report filing fee.
5. Rule Chapter 250 §II (C)(1)(b): Provide the intrastate experience rating calculation for the State of Maine. The intrastate experience modification is the only acceptable factor. This may be submitted, on behalf of the self insurer, by a qualified third party.
6. Rule Chapter 250 §II (C)(1)(c): Provide location(s) of Maine operations with the number of Maine employees at each location. Provide an aggregate estimated payroll report sorted by NCCI workers' compensation classification code(s) for the prospective year.
7. Rule Chapter 250 §II (C)(1)(d): Furnish evidence of reinsurance for the period for which authority is being requested or a request for a waiver with justification.
8. Rule Chapter 250 §I (C)(1)(e), Rule Chapter 250 §I (D)(4), & Insurance Bulletin 320: For plans secured by an actuarially determined trust fund, provide two copies of an actuarial review. Furnish the "Certification of Compliance with Prohibition Against Political Contributions."
9. Rule Chapter 250 §II (C)(1)(h): Identify the location in the State of Maine of the complete and accurate payroll and claims records.
10. Rule Chapter 250 §II (C)(1)(i): Provide summary claims history, by accident year, for all years of self-insurance in the following format:

	Gross Incurred Amount	Total Paid Amount	Gross Reserve Amount	Anticipated Subrogation and Recoveries	Net Reserves
Medical Cost					
Indemnity Cost					
Other Expense					
Total					
*Subrogation and recoveries are amounts received from or anticipated to be received from subrogation and all reinsurers. Note: claims older than ten years can be grouped together for reporting purposes					

11. Identify the applicant and obtain the appropriate signature on the declarations section of this application form.

### General Instructions

Self-insurers must make a **complete** application for renewal of authorization to self-insure workers' compensation to the Superintendent not less than 21 days prior to the self-insurer's renewal date, except that evidence of reinsurance may be submitted up to 3 working days prior to renewal. The application will not be considered complete until all requested data has been filed. The application may be filed 60 days in advance of the renewal date to allow for a determination of completeness. In that case, the Superintendent will notify the applicant within 30 days of any deficiencies in the application.

The certificate of authority issued by the Superintendent of Insurance is a license within the definition of the Administrative Procedures Act, Title 5 M.R.S.A. The statute provides under section 10002, "When a licensee has made timely and sufficient application for renewal of a license, the existing license shall not expire until the application has been finally determined by the agency." A timely and sufficient application is one that is **complete**.

### Declarations

The undersigned (herein applicant), a legal entity employing people in the State of Maine, subject to the Maine Workers Compensation Act, hereby makes application to renew its certificate of authority to self-insure benefits and understands that it must notify the Superintendent 45 days in advance of the following:

- a. An acquisition of an issuer's securities which are entitled to be voted or otherwise carry the ability to influence the conduct of business affairs of the self-insurer, either in a single or a series of transactions, which results in ownership by a single interest equal to or exceeding 20% of such securities; and
- b. The employer or any guarantor changes business form or majority ownership through a spin-off, merger, acquisition, or other reorganization of the company structure.

and further understands that it must notify the Superintendent 30 days in advance of any of the following:

- a. Any change in servicing agents; and
- b. Any proposed change in the approved reinsurance program, including, but not limited to, retention or attachment point, limits of coverage, carrier, policy forms, or endorsements. Notice must also be given to the Maine Self-Insurance Guarantee Association, if the self-insurer is required to be a member.

and further understands that it must notify the Superintendent 10 days in advance of any of the following:

- a. Sale or transfer of more than 20% of the self-insurer's assets based upon the most recent annual report for the year preceding, such to include divisions, affiliates, subsidiaries, and other business entities. Transactions in the ordinary course of business are exempted from this requirement.
- b. Expanded operations where payrolls and exposures were increased 20% or more when compared to the most recent information used for calculating security;
- c. The self-insurer's bond obligations are down-graded below investment grade as assigned by a national bond rating agency or its bond obligations have been down-graded to lower than investment grade;
- d. Revocation or suspension of self-insurance license or authority in another jurisdiction;
- e. Changes in the names and addresses of the self insurer or guarantor; and
- f. Changes in officers or directors of the self-insurer or guarantor.

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Employer's Name

By: \_\_\_\_\_  
Authorized Corporate Officer

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Date